

BEST AVAILABLE COPY

| MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876) | | | | | | | SERIAL NO. 09/472869 | | FILING DATE 12-28-99 | | |
|--|----------|------|------------------------|------|------------------------|------|-------------------------|------|-------------------------|------|--|
| | | | | | | | APPLICANT(S) | | | | |
| | | | | | | | CLAIMS | | | | |
| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | | | | | | |
| | IND. | DEP. | IND. | DEP. | IND. | DEP. | IND. | DEP. | IND. | DEP. | |
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| TOTAL DEP. | 8 | | | | | | | | | | |
| TOTAL CLAIMS | 11 | | | | | | | | | | |
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| TOTAL CLAIMS | | | | | | | | | | | |

PTO-1000 (2-79)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS U.S. DEPARTMENT OF COMMERCE